

MDDCSAM is a chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

HB 396 - Health and Government Operations - Overdose and Infectious Disease Prevention Services Program 3/11/21

## **FAVORABLE**

Chairman Pendergrass and Members of the Health and Government Operations Committee,

My name is Malik Burnett and I am an addiction medicine physician at the University of Maryland Medical Center and completed my residency training in preventive medicine at Johns Hopkins School of Medicine, and I am writing to you today on behalf of the MD-DC American Society of Addiction Medicine (MDDCASAM) in favor of the passage of HB 396 which would establish overdose prevention sites (OPS) statewide.

According to data from the Department of Health, 1829 Marylander's died of an opioid related overdose through September of last year. We can be sure that even more of our state's citizens will die this year, as the number of annual overdose deaths has been increasing year over year for the last two decades. Nationally, less than one in five of people with opioid use disorder have accessed treatment within the last 12 months. (1) What is clear from the aforementioned statistics is that our current strategy is failing to protect our citizens, the time has come for a new approach.

Overdose prevention sites have been implemented in across the world and a review of 75 published studies concluded that safe injection sites reduce overdoses and do not lead to increases in drug use or related crime. (2) In fact, research indicates that people who use OPS are more likely to enter detox and initiate treatment. (3)

The good news is Maryland already has all of the governance and administrative knowledge within the Department of Health to quickly and effectively establish overdose prevention sites in accordance with HB 396. As a practical matter, overdose prevention sites are syringe service programs with additional clinical staff who intervene to save an individual in event of an overdose. In fact, a review of the statutory program requirements for syringe service programs passed in SB97 in 2016 reveals essentially identical language to the statutory program requirements for overdose prevention sites outlined in HB396. The Department of Health, through its Center for Harm Reduction Services can leverage the existing syringe service program framework and the existing partnerships with local health departments and community-based organizations to create OPS services.

To further illustrate how the framework for OPS outlined in HB396 already exists in Department of Health's syringe service program, one need look no further than the locations of the syringe service programs themselves. HB 396 calls for six OPS programs to be established. Two in urban areas, two in

suburban areas, and two in rural areas. A review of overdose deaths in 2020 by county puts Baltimore City, Baltimore County, Montgomery County, Prince George's County, Washington County and Cecil County as 6 of the 7 top counties for total deaths. All of these counties currently have local health departments operating syringe service programs; each of which could be transitioned to an overdose prevention site, quickly fulfilling HB 396's statutory requirements.

It is clear that the state of Maryland has both the need for overdose prevention sites and the relevant expertise at the state and local level to successfully implement these programs. The only question that remains is do the state's elected officials have the political will to pass legislation that would allow for the establishment of these programs? It is the Maryland DC Society of Addiction Medicine's desire and the desire of the thousands of Maryland families that have lost loved ones to scourge overdose that you will give this legislation a favorable recommendation and begin the process of slowing the increase in overdose deaths that currently runs unabated.

## Respectfully,

G. Malik Burnett, MD MBA MPH Addiction Medicine Fellow, University of Maryland Medical Center Board Member, Maryland-DC Society of Addiction Medicine

## References:

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- 2. Chloé Potier, Vincent Laprévote, Françoise Dubois-Arber, Olivier Cottencin, Benjamin Rolland, Supervisedinjection services: What has been demonstrated? A systematic literature review, Drug and Alcohol Dependence, Volume 145, 2014, Pages 48-68
- 3. Wood, E., Tyndall, M.W., Zhang, R., Montaner, J.S.G. and Kerr, T. (2007), Rate of detoxification service use and its impact among a cohort of supervised injecting facility users. Addiction, 102: 916-919.

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